



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number <b>0136802</b>		3. This Statement covers From: <u>08/27/12</u> to <u>10/21/12</u>	
2. Committee Name <b>CTE Kim Meltzer</b>		4. Candidate Last Name <b>Meltzer</b> First Name <b>Kimberly</b> M.I. <b>D</b> 4a. Office Sought Including District # or Community Served (If applicable) <b>Clinton Twp. Clerk</b> 4b. County of Residence <b>Macomb</b>	
5. Committee's Mailing Address <b>20585 Leelanau Trail Clinton Twp., MI 48038</b>  Area Code and Phone <u>(586) 709-1321</u> <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>		6. Treasurer's Name & Residential Address <b>Kim Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038</b>  Area Code & Phone <u>(586) 709-1321</u>	
7. Treasurer's Business Address    Area Code and Phone _____		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)    Area Code and Phone _____	

**9. TYPE OF STATEMENT**

9a. ☒ Pre-Election      OR      9b. ☐ Post-Election

9c. ☐ Annual Statement ( \_\_\_\_\_ Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution \_\_\_\_\_

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.**

Current Treasurer or Designated Record keeper	<u>Kim Meltzer</u> Type or Print Name	<u>Kim Meltzer</u> Signature	Date <u>10/26/2012</u>
Candidate	<u>KIM MELTZER</u> Type or Print Name	<u>K Meltzer</u> Signature	Date <u>10/26/2012</u>



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 0136802

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name CTE Kim Meltzer

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>7,200.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$		(18.) \$
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$		(19.) \$
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$7,200.00</u>	(20.) \$
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$	<u>\$47.79</u>	(21.) \$
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$	<u>\$35.80</u>	(22.) \$
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$		(23.) \$
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$9,899.39</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$9,899.39</u>	(24.) \$
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$4,461.50</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$7,200.00</u>	
	(15.) = \$	<u>\$11,661.50</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>			
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>\$9,899.39</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$1,762.11</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/12</u></p> <p>Name &amp; Address:</p> <p>Gallagher, Anne 32833 N. River Rd. Harrison Twp., MI 48045</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/02/12</u></p> <p>Name &amp; Address:</p> <p>George, James 19634 Westchester Clinton Twp., MI 48038</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Developer</u>      Employer <u>Self</u></p> <p>Business Address <u>85 N. Main Mt. Clemens MI 48043</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/03/12</u></p> <p>Name &amp; Address:</p> <p>Wagner, Dale 29480 24 Mile Rd. Chesterfield Twp., MI 48061</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/05/12</u></p> <p>Name &amp; Address:</p> <p>Sorrentino, Angela 47111 Mallard Dr. Shelby Twp., MI 48315-5002</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal

800.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/04/12</u> Name & Address: <b>Tunison, James</b> <b>3353 St. Clair Shores Blvd.</b> <b>East China, MI 48054</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/11/12</u> Name & Address: <b>Meltzer, Kim</b> <b>20585 Leelanau Trail</b> <b>Clinton Twp., MI 48038</b>		\$ <u>1000.00</u>	\$ <u>2100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Administrator</u> Employer <u>CAMmand Machining LLC</u> Business Address <u>101 Shafer Romeo MI 48065</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/17/12</u> Name & Address: <b>10th Congressional District Republican Committee</b> <b>48653 Van Dyke Ave</b> <b>Shelby Twp., MI 48317</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address <u>13651 Knight Ct. Shelby Twp. MI 48315</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/18/12</u> Name & Address: <b>Nickerson, Michael</b> <b>43431 Salt Creek</b> <b>Clinton Twp., MI 48038</b>		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$1,400.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/17/12</u> Name & Address: <b>Graham, Mark</b> <b>16328 Vandelay Dr</b> <b>Macomb, MI 48044</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>salesman</u> Employer <u>Detroit Lions Club</u> Business Address <u>Detroit MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/12</u> Name & Address: <b>Nicolella, Frank</b> <b>37548 Hidden Valley Ct.</b> <b>Clinton Twp., MI 48036</b>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Nino Salvaggios</u> Business Address <u>17496 Hall Rd Clinton Twp., MI 48038</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/12/12</u> Name & Address: <b>Kleeman Trust, Eugene</b> <b>43164 W. Kirkwood Dr.</b> <b>Clinton Twp., MI 48038</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/18/12</u> Name & Address: <b>Abbate, Dominic</b> <b>2500 Royal View Dr.</b> <b>Oakland, MI 48363</b>		\$ <u>50.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$600.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/01/12</u> Name & Address: <b>Lotito, Michael</b> <b>22525 Hall Rd Ste A</b> <b>Macomb MI 48042</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/22/12</u> Name & Address: <b>Sumner, Marlin</b> <b>41210 Fox Run Dr.</b> <b>Clinton Twp., MI 48038</b>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/25/12</u> Name & Address: <b>Ruggirello, Peter</b> <b>18987 Riverway Ct.</b> <b>Clinton Twp., MI 48038</b>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/15/12</u> Name & Address: <b>Ciaramitaro, Joseph</b> <b>38954 Santa Barbara St.</b> <b>Clinton Twp., MI 48036</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$300.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/21/12</u> Name & Address: Udicki, Maria 1910 Flagstone Cir Rochester, MI 48307		\$ <u>800.00</u>	\$ <u>900.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Warren Industries</u> Business Address <u>22805 Interstate Clinton Twp., MI 48035</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/12</u> Name & Address: Udicki, Doug 1217 Creekview Dr. Rochester, MI 48307		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Warren Industries</u> Business Address <u>22805 Interstate Clinton Twp., MI 48035</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/12</u> Name & Address: Smarsh, Steven PO Box 46965 Mt. Clemens, MI 48046		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Tru Tech Systems</u> Business Address <u>24550 N. River Rd. Mt. Clemens MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/15/12</u> Name & Address: Carik, John 77 Vistaview Ct. Rochester Hills, MI 48306		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Carik Marketing Group LLC</u> Business Address <u>17610 East Kirkwood Dr. Clinton Twp., MI 48038</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$3,100.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802  
2. Committee Name CTE Kim Meltzer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/19/12</u> Name & Address: <b>Andary, Kathleen</b> <b>19011 Martin Dr.</b> <b>Clinton Twp., MI 48038</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>legal assistant</u> Employer <u>Towner &amp; Towner</u> Business Address <u>38770 Garfield Rd Ste 100 Clinton Twp., MI 48036</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/12</u> Name & Address: <b>Ballenberger, Emily</b> <b>1313 Yorktown St</b> <b>Grosse Pointe Woods, MI 48236</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>Plunkett Cooney</u> Business Address <u>10 S. Main Ste 400 Mt. Clemens MI 48043</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/12</u> Name & Address: <b>Uhlig, Kathy</b> <b>51844 Johns Dr</b> <b>Chesterfield MI 48047</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>housewife</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/18/12</u> Name & Address: <b>Yore Jr., James</b> <b>21940 Wendell St.</b> <b>Clinton Twp., MI 48036</b>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>auto worker</u> Employer <u>Chrysler</u> Business Address <u>38111 Van Dyke Avenue Sterling Heights MI 48316</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$1,000.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

**7200.00**

Enter this total on  
line 3a of Summary  
Page.





# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

### CANDIDATE COMMITTEE

1. Committee I. D. Number 0136802

2. Committee Name CTE Kim Meltzer

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: RTL of Michigan 2340 Porter St PO box 901 Grand Rapids, MI 49509  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>list rental</u>  5. Date Of Receipt: <u>10/17/12</u> 6. Vendor Name & Address:	\$ <u>47.79</u> \$	
<a href="#">Click Here for Memo Itemization</a>			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Clarence Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>website</u>  5. Date Of Receipt: <u>09/21/12</u> 6. Vendor Name & Address:  Plimus, Inc. 49106 Milmont Freemont CA 94538	\$ <u>15.90</u> \$	
<a href="#">Click Here for Memo Itemization</a>			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Clarence Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>website</u>  5. Date Of Receipt: <u>10/21/12</u> 6. Vendor Name & Address:  Plimus, Inc. 49106 Milmont Freemont CA 94538	\$      \$	
<a href="#">Click Here for Memo Itemization</a>			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$83.59**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 0136802  
2. Committee Name CTE Kim Meltzer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>Plimus, Inc.</b> Address <b>49016 Milmont Dr Fremont, CA 94538</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/12</u> Date	\$ <u>15.90</u> Click Here for Memo Itemization Type
<b>Expenditure #2</b> Name <b>Plimus, Inc.</b> Address <b>49016 Milmont Dr Fremont, CA 94538</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/12</u> Date	\$ <u>19.90</u> Click Here for Memo Itemization Type
<b>Expenditure #3</b> Name <b>Clinton Twp. Postmaster</b> Address <b>Garfield, Clinton Twp., MI 48038</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>envelopes</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/12</u> Date	\$ <u>2.19</u> Click Here for Memo Itemization Type
<b>Expenditure #4</b> Name <b>Clinton Twp. Postmaster</b> Address <b>Garfield, Clinton Twp., MI 48038</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/12</u> Date	\$ <u>32.00</u> Click Here for Memo Itemization Type
<b>Expenditure #5</b> Name <b>WAM Print</b> Address <b>5510 - 33rd SE Grand Rapids, MI 49512</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>mailer</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/06/12</u> Date	\$ <u>698.48</u> Click Here for Memo Itemization Type

Subtotal this page

**\$768.47** ~~732.67~~

Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 0136802  
2. Committee Name CTE Kim Meltzer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Print Masters</b>  Address 26039 Dequindre Madison Heights, MI 48071  <input type="checkbox"/> Fund Raiser	Purpose: <u>printing lit</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/12</u> Date	\$ <u>345.35</u>
Expenditure #2 Name <b>Sawicki &amp; Sons</b>  Address 1521 W. Lafayette Detroit, MI 48216  <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/12</u> Date	\$ <u>1000.00</u>
Expenditure #3 Name <b>Passport Pizza</b>  Address 41831 Garfield Clinton Twp., MI 48038  <input type="checkbox"/> Fund Raiser	Purpose: <u>community event</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/18/12</u> Date	\$ <u>50.00</u>
Expenditure #4 Name <b>Clinton Twp. Goodfellows</b>  Address P.O. Box 380643 Clinton Township, MI 48308  <input type="checkbox"/> Fund Raiser	Purpose: <u>community event</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/12</u> Date	\$ <u>100.00</u>
Expenditure #5 Name <b>Office Depot</b>  Address 44835 Schoenherr Road Sterling Heights, MI  <input type="checkbox"/> Fund Raiser	Purpose: <u>office supply</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/12</u> Date	\$ <u>18.54</u>
Subtotal this page			\$ <u>1,513.89</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 0136802  
2. Committee Name CTE Kim Meltzer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>CTE David Pierce</b>  Address 37822 Pocahontas Dr Clinton Township, MI 48036-2184  <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/12</u> Date	\$ <u>100.00</u>
Click Here for Memo Itemization Type			
<b>Expenditure #2</b> Name <b>Sawicki &amp; Sons</b>  Address 1521 W. Lafayette Detroit, MI 48216  <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/26/12</u> Date	\$ <u>1120.00</u>
Click Here for Memo Itemization Type			
<b>Expenditure #3</b> Name <b>Passport Pizza</b>  Address 41831 Garfield Clinton Twp., MI 48038  <input type="checkbox"/> Fund Raiser	Purpose: <u>community event</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/05/12</u> Date	\$ <u>51.13</u>
Click Here for Memo Itemization Type			
<b>Expenditure #4</b> Name <b>Manhattan Mailers</b>  Address 51132 Milano Dr. Macomb MI 48042  <input type="checkbox"/> Fund Raiser	Purpose: <u>mailer</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/12</u> Date	\$ <u>3606.11</u>
Click Here for Memo Itemization Type			
<b>Expenditure #5</b> Name <b>Clinton Twp. Senior Center</b>  Address 40700 Romeo Plank Road Clinton Twp., MI 48038  <input type="checkbox"/> Fund Raiser	Purpose: <u>community event</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/12</u> Date	\$ <u>100.00</u>
Click Here for Memo Itemization Type			
Subtotal this page			\$ <u>4,977.23</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 0136802  
2. Committee Name CTE Kim Meltzer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>USPS</b>  Address <b>Garfield, Clinton Twp., MI 48038</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/12</u> Date	\$ <u>32.00</u>
Expenditure #2 Name <b>Print Masters</b>  Address <b>26039 Dequindre Madison Heights, MI 48071</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>print lit</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/12</u> Date	\$ <u>2607.60</u>
Expenditure #3 Name <b>Huntington Bank</b>  Address <b>20650 Hall Rd Clinton Twp., MI 48038</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>bank fee</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/17/12</u> Date	\$ <u>36.00</u>
Expenditure #4 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$2,675.60**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$9,899.39**

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number

00136802

2. Committee Name

CTE Kim Meltzer

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 8 minus item 9)  <input type="checkbox"/> FORGIVEN
Debt #1 Owed to or by:  Kim Meltzer 20585 Leelanau Trail Clinton Twp., MI 48038  Corp? <input type="checkbox"/> Yes	4. Type: loan 5. Date Debt Was Incurred: 11/01/04 6. Original Amount of Debt: \$ 28785.79	\$ \$ \$ \$ \$	\$	\$ 28785.79 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by:  Corp? <input type="checkbox"/> Yes	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by:  Corp? <input type="checkbox"/> Yes	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$28,785.79

(Complete on last page of Schedules showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

\$28,785.79

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802  
2. Committee Name CTE Kim Meltzer

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>04/11/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 29.95</u>	\$ \$ \$ \$ \$	\$	\$ <u>28815.74</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>04/15/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10.17</u>	\$ \$ \$ \$ \$	\$	\$ <u>28825.91</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>04/16/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 300.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>28125.91</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$29,125.91**

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
<b>Debt #1</b> Corp? <input type="checkbox"/> Yes Owed to or by: <b>Kim Meltzer</b> <b>20585 Leelanau Trail</b> <b>Clinton Twp MI 48038</b>	<b>4. Type:</b> loan <b>5. Date Debt Was Incurred:</b> <u>04/18/12</u> <b>6. Original Amount of Debt:</b> <u>\$ 250.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>28375.91</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
<b>Debt #2</b> Corp? <input type="checkbox"/> Yes Owed to or by: <b>Kim Meltzer</b> <b>20585 Leelanau Trail</b> <b>Clinton Twp MI 48038</b>	<b>4. Type:</b> loan <b>5. Date Debt Was Incurred:</b> <u>04/22/12</u> <b>6. Original Amount of Debt:</b> <u>\$ 15.90</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>29391.81</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
<b>Debt #3</b> Corp? <input type="checkbox"/> Yes Owed to or by: <b>Kim Meltzer</b> <b>20585 Leelanau Trail</b> <b>Clinton Twp MI 48038</b>	<b>4. Type:</b> loan <b>5. Date Debt Was Incurred:</b> <u>04/24/12</u> <b>6. Original Amount of Debt:</b> <u>\$ 300.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>29691.81</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$29,691.81**

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802

2. Committee Name CTE Kim Meltzer

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (item 5 minus item 8)
Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>04/25/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 5.00</u>	\$ \$ \$ \$ \$	\$	\$ 29696.81 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>05/01/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 250.00</u>	\$ \$ \$ \$ \$	\$	\$ 29946.81 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>05/21/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 15.90</u>	\$ \$ \$ \$ \$	\$	\$ 29962.71 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$29,962.71**

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number

0136802

2. Committee Name

CTE Kim Meltzer

This Schedule itemizes:

- a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.  
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Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 06/13/12 6. Original Amount of Debt: \$ 1.50	\$ \$ \$ \$ \$	\$	\$ 29964.21 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 06/20/12 6. Original Amount of Debt: \$ 26.44	\$ \$ \$ \$ \$	\$	\$ 29990.65 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 06/21/12 6. Original Amount of Debt: \$ 15.90	\$ \$ \$ \$ \$	\$	\$ 30006.55 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$30,006.55

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total  
on line 12a "owed  
by" or line 12b  
"owed to" of the  
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number **0136802**  
2. Committee Name **CTE Kim Meltzer**

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Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 06/06/12 6. Original Amount of Debt: \$ 14.37	\$ \$ \$ \$ \$	\$	\$ 30020.92 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 07/06/12 6. Original Amount of Debt: \$ 33.66	\$ \$ \$ \$ \$	\$	\$ 30054.58 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes  Kim Meltzer 20585 Leelanau Trail Clinton Twp MI 48038	4. Type: loan 5. Date Debt Was Incurred: 07/21/12 6. Original Amount of Debt: \$ 15.90	\$ \$ \$ \$ \$	\$	\$ 30070.48 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		

Page Subtotal (Outstanding debt)

**\$30,070.48**

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

**\$30,070.48**

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 0136802  
2. Committee Name CTE Kim Meltzer

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3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Kim Meltzer</b> <b>20585 Leelanau Trail</b> <b>Clinton Twp., MI 48038</b>	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/11/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1000.00</u>	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Plimus, Inc.</b> <b>49016 Milmont Dr.</b> <b>Fremont, CA 94538</b>	4. Type: <u>in-kind loan</u> 5. <u>Date Debt Was Incurred:</u> <u>09/21/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 15.90</u>	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Plimus, Inc.</b> <b>49016 Milmont Dr.</b> <b>Fremont, CA 94538</b>	4. Type: <u>in-kind loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/21/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 19.90</u>	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$1,035.80**

Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee)

**31,106.28**

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.